



# K A N S A S

RODERICK L. BREMBY, SECRETARY

KATHLEEN SEBELIUS, GOVERNOR

## DEPARTMENT OF HEALTH AND ENVIRONMENT

December 19, 2005

Dear Doctor:

Pertussis cases continue to occur throughout Kansas. Nationally, the United States Centers for Disease control and prevention indicates that pertussis rates have increased by 67% in the adolescent population. This phenomenon is mirrored in Kansas. Our goal is to protect all Kansans from illness due to pertussis. Correct diagnosis, testing and treatment is important; therefore, the Kansas Department of Health and Environment recommends the following:

- Consider pertussis when evaluating any infant, child, adolescent or adult with an acute illness characterized by prolonged cough ( $\geq 2$  weeks) or cough with paroxysms, whoop or post-tussive gagging/vomiting. Infants may present with apnea and/or bradycardia with minimal or no cough. Individuals with symptoms most consistent with a viral syndrome (fever, headache, myalgias and sore throat) should not be tested or treated for pertussis.
- Confirmation of pertussis can be achieved through culture or Polymerase Chain Reaction (PCR) from a naso-pharyngeal (N/P) specimen. Specimens should be collected using an N/P swab. Many commercial laboratories have the capability to perform *B. pertussis* PCR analysis, as well as the Kansas Department of Health and Environment laboratory (KDHEL).
- The PCR is considered a diagnostic test, not a screening test and is most appropriate for symptomatic patients. Use of PCR testing technology for screening may result in erroneous interpretation.
- PCR test and culture should not be considered, if the onset of cough exceeds 3 weeks in duration. It is unlikely that the bacteria or bacteria DNA will still be detected after that time.
- All specimens submitted to the KDHEL for PCR testing will be accepted ONLY if the following information is submitted with the specimen: 1) Date of onset of cough; 2) Symptoms
- Reference Laboratories identified that currently provide a *B. pertussis* PCR analysis:
  1. Focus laboratories Ca., 1-800-445-4032
  2. Mayo Reference Lab, MN. 1-800-553-1710
  3. Via Christi Medical Ctr., KS., ASM 1-316-268-4533Sites should check with their contracted reference laboratory to determine if alternate testing facilities are available
- Report known or suspected cases, within four hours of diagnosis, to the health department. You may call your local health department or call KDHE at the toll free number 877-427-7317.
- Antimicrobial agents given during the catarrhal stage may ameliorate the disease. After the cough is established, antimicrobial agents may have no discernible effects on the course of the illness, but are recommended to limit the spread of organisms to 5 days in contrast to approximately 3 weeks in untreated persons. The health care provider may choose one of several antibiotics recommended for the treatment of pertussis patients and prophylaxis of their contacts (treatment protocols attached).

- Assess the household and other contacts of patients whom you suspect have pertussis for exposure to the disease. While the KDHE assists with contact tracing, your role in identifying any infants who may be at risk is invaluable.
- Exposure is defined by KDHE as face-to-face contact with a symptomatic person for 1 hour or longer in a confined space, or direct contact with respiratory, or nasal secretions of a symptomatic person.
- The immunization status of all contacts  $\leq 6$  years of age who are not up-to-date with DTaP should be brought up to date with doses of DTaP, using the minimal recommended intervals (immunization schedule attached). Because the protective efficacy of pertussis immunization wanes after the last vaccine dose, the great majority of teenagers and adults are susceptible to pertussis, even if they were immunized in early childhood.
- Persons with known/suspected pertussis are to refrain from contact outside the household for the first 5 days of antimicrobial treatment.

Sincerely,

Howard Rodenberg, MD, MPH  
Director of Health

Gail Hansen, DVM, MPH  
State Epidemiologist

Michael Runau  
Immunization Program Director

### **Kansas Immunization Program**

Bureau of Epidemiology and Disease Prevention

DIVISION OF HEALTH

Curtis State Office Building, 1000 SW Jackson, Suite 210, Topeka, Kansas 66612-1274

Phone 785-296-5591 Fax 785-296-6510 Website [www.kdhe.state.ks.us/immunize](http://www.kdhe.state.ks.us/immunize)

For Disease Reporting and Public Health Emergencies: Toll-Free Phone 1-877-427-7317 Toll-Free Fax 1-877-427-7318